Disrupting the Cycle of Chronic Homelessness in Los Angeles County

Los Angeles County is facing a deepening and dynamic homelessness crisis that endangers the health and well-being of many of its residents. One of the most difficult challenges we face in combatting this crisis is assisting those who are experiencing chronic homelessness, defined as having experienced either long-term or repeated bouts of homelessness while living with a chronic disabling condition.

Chronic homelessness is inextricably linked to the proliferation of untreated serious mental health illnesses, substance abuse disorders, and medical conditions. Approximately one-third of individuals experiencing homeless in the county suffer from a serious mental illness or substance use disorder, according to the Los Angeles Homelessness Services Authority. Intervention is needed to prevent these individuals from entering our criminal justice system, as approximately 30 percent of the nearly 18,000 inmates in the county jail system suffer from a mental illness. National and state data further underscores the proliferation of substance use disorders and mental illnesses among the homeless and incarcerated populations. According to the Substance Abuse and Mental Health Services Administration, 30 percent of those experiencing chronic homelessness in the United States have a mental illness. Furthermore, data compiled by the Stanford Justice Advocacy Project from the California Department of Corrections and Rehabilitation shows that over 30% of California's prisoners currently receive treatment for a serious mental disorder, which is an increase of 150 percent since the year 2000. The intersection of mental illness with homelessness and the criminal justice system, as demonstrated by an abundance of statistics, is indicative of statutory and systemic inequities that have gone unaddressed and essentially ignored for decades.

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Over the last two years, the county has pushed to provide a more meaningful standard of mental health care. Conservatorships play a key role in this effort, and the county has attempted to improve the conservatorship process by pursuing state legislation to clarify the term "grave disability" which is used to assess whether a conservatorship is appropriate. The State Legislature has been actively engaged in pursuing reforms and has recognized that statutory changes are needed to improve treatment for people living on the streets. In order to assess the laws regarding involuntary treatment and civil commitment, the legislature recently authorized a joint audit of the Lanterman-Petris-Short (LPS) laws which have remained unchanged since enactment in 1967. The county has also sought to increase access to mental health beds across the health care system. According to data compiled by the California Hospital Association, only 22.7 public mental health beds are available per 100,000 Los Angeles County residents. This is far below the recommended minimum of 50 public mental health beds per 100,000 that are required to adequately meet the need.

Despite the county's efforts, many of which will take time to fully implement, a significant number of chronically homeless individuals continue to cycle through our hospitals and jails, ultimately being released back into homelessness. This status quo is unacceptable, and as a County we must re-examine our immediate ability to disrupt this seemingly never-ending and inhumane cycle of chronic homelessness, incarceration, and hospitalizations.

WE, THEREFORE, MOVE THAT THE BOARD OF SUPERVISORS:

- Direct the Directors of the Departments of Public Health (DPH), Mental Health (DMH), Health Services (DHS), in coordination with County Counsel and the Chief Executive Officer (CEO) to explore inherent powers and authority afforded to the County of Los Angeles, specifically within the individual health departments, to address the specific issue of treatment intervention as it relates to chronically homeless individuals where health or mental health assistance could be life-saving;
- Direct the Directors of DPH, DMH and DHS, in coordination with the CEO and the Medical Examiner-Coroner, to track the number of deaths and causes of death involving homeless individuals, specifically those with serious mental illness and/or addiction:

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- 3. Direct the Director of DMH, the CEO and County Counsel to explore legislative changes to minimize the impact of People v. Sanchez in Lanterman-Petris-Short (LPS) conservatorship proceedings so that the parties, especially the trier-of-fact, may consider all relevant information in deciding conservatorship matters;
- 4. Direct the Director of DMH to explore the meaning and application of "danger to self" not just in the context of active suicidal risk, but also due to passive self-neglect under the LPS Act and for the purposes of involuntary mental health treatment overall;
- 5. Direct the Director of DMH to report back in writing to the Board of Supervisors in 60 days providing a comprehensive update on the above, as well as an assessment of the feasibility of implementing SB 1045 in Los Angeles County and progress to date in other jurisdictions.

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